24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (5

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee NEYLAN & PARTNERS	Date of Public Distribution/Dissemination 01 21 2016
Mailing Address 9647 AMOUR CT	Amount
City State Zip Code	475000.00
NAPLES FL 34119	Transaction ID : SE24.1213 Date of Disbursement or Obligation
Purpose of Expenditure ADVERTISING - TV Category/ Type	01 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District:
CARLY FIORINA	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	oursement For:
Full Name of Payee SPECTRUM MARKETING COMPANIES	Date of Public Distribution/Dissemination
Mailing Address 95 EDDY RD	01 21 2016
STE 101	Amount
City State Zip Code	43742.00
MANCHESTER NH 03102	Transaction ID : SE24.1212 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL Category/ Type	01 / 19 / 2016
Name of Federal Candidate Support Office	ce Sought: House District:
CARLY FIORINA Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought Disb. 2011	oursement For: X Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	518742.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Christopher M. Marston [Electronically Filed] Date	01 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y